## EXHIBIT C

This page may be reproduced if necessary. SEALED BID NUMBER REP#09-011-28 EOC NO .: \_ NAME AND ADDRESS None OF SUB-CONTRACTOR PRINCIPAL . . . . . . . . . . . . . TYPE OF WORK TO BE SUB-CONTRACTED E. Minority C. Female Circle/Check A. Docarry E. Minority Owned Business Owned Business Appropriate Information Owned Small Enterprise Enterprise CLASSIFICATION Circle/Check Definition Page Attached Business Female (Do not circle "C" if this space [female] is checked) NAME AND ADDRESS OF SUB-CONTRACTOR PRINCIPAL TYPE OF WORK TO BE SUB-CONTRACTED CLASSIFICATION A. Locally B. Minority C. Female D. NA Circle/Check Appropriate Information Owned Small Owned Business Owned Business Indicate by A, B, C or NA Business Enterprise Enterprise Male Definition Page Attached Female (Do not circle "C" if this space [female] is checked) NAME

THE INFORMATION REFERENCED FOR CLASSIFICATION IS FOR INFORMATIONAL PURPOSES ONLY AND IS NOT A CRITERIA FOR THE SELECTION OR AWARD OF ANY OR CONTRACT. IF NONE, THEN INDICATE SO ON THE BID SUBCONTRACTOR LINE FIRST ABOVE AND SIGN WHERE INDICATED.

SIGNATURE